

## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)

2010

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury  
Internal Revenue Service**A For the 2010 calendar year, or tax year beginning Sep 1 , 2010, and ending Aug 31 , 2011**

<b>B Check if applicable:</b>	<b>C Name of organization</b> NATIONAL WILDLIFE FEDERATION ACTION FUND	<b>D Employer Identification Number</b> 74-2556532
<input type="checkbox"/> Address change	Doing Business As	
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street addr)	
<input type="checkbox"/> Initial return	901 E STREET, NW	
<input type="checkbox"/> Terminated	City, town or country	State ZIP code + 4
<input type="checkbox"/> Amended return	WASHINGTON DC 20004	
<input type="checkbox"/> Application pending	<b>F Name and address of principal officer:</b> <b>SUE BROWN SAME AS A C ABOVE</b>	
<b>I Tax-exempt status</b> <input checked="" type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( 4 ) ► (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>G Gross receipts</b> \$ 1,041,838.
<b>J Website:</b> ► WWW.NWFACTIONFUND.ORG		<b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		<b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'No,' attach a list. (see instructions)
		<b>H(c) Group exemption number</b> ►
		<b>M State of legal domicile:</b> CO

<b>Part I Summary</b>			
<b>Activities &amp; Governance</b>	1 Briefly describe the organization's mission or most significant activities: <u>SEE SCHEDULE O</u>		
	----- ----- -----		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a) .....	3	12
	4 Number of independent voting members of the governing body (Part VI, line 1b) .....	4	12
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) .....	5	2
	6 Total number of volunteers (estimate if necessary) .....	6	12
	7a Total unrelated business revenue from Part VIII, column (C), line 12 .....	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34 .....	7b	
<b>Revenue</b>		<b>Prior Year</b>	<b>Current Year</b>
	8 Contributions and grants (Part VIII, line 1h) .....	2,414,372.	1,038,547.
	9 Program service revenue (Part VIII, line 2g) .....		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	5,111.	3,291.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....		
	12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	2,419,483.	1,041,838.
<b>Expenses</b>		635,202.	1,800.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....		
	14 Benefits paid to or for members (Part IX, column (A), line 4) .....	296,028.	662,645.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....		
	16a Professional fundraising fees (Part IX, column (A), line 11e) .....		
	b Total fundraising expenses (Part IX, column (D), line 25) ► 55,787.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) .....	969,286.	1,242,551.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	1,900,516.	1,906,996.
	19 Revenue less expenses. Subtract line 18 from line 12 .....	518,967.	-865,158.
<b>Net Assets or Fund Balances</b>		<b>Beginning of Current Year</b>	<b>End of Year</b>
	20 Total assets (Part X, line 16) .....	1,717,695.	902,547.
	21 Total liabilities (Part X, line 26) .....	77,897.	127,907.
	22 Net assets or fund balances. Subtract line 21 from line 20 .....	1,639,798.	774,640.

**Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	► Signature of officer	Date			
	► Type or print name and title.				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>Robert E. Lane</b>	Preparer's signature 	Date <b>7/12/12</b>	Check <input checked="" type="checkbox"/> if self-employed	PTIN
	Firm's name ► <b>Lane &amp; Company, CPA's</b>	Firm's EIN ►			
	Firm's address ► <b>1920 N Street NW, Suite 320 Washington DC 20036</b>	Phone no. (202) 463-6500			

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

## **Statement of Program Service Accomplishments**

**Check if Schedule O contains a response to any question in this Part III**

**1** Briefly describe the organization's mission:

SEE SCHEDULE O

**2** Did the organization undertake any significant program services during the year which were not listed on the prior

Form 990 or 990-EZ? .....  Yes  No  
If 'Yes', describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ....  Yes  No

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ 1,667,695. including grants of \$ 1,800.) (Revenue \$ 0.)

SEE SCHEDULE O

**4b** (Code: \_\_\_\_\_) (Expenses \$ \_\_\_\_\_) including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

**4c** (Code: \_\_\_\_\_) (Expenses \$ \_\_\_\_\_) including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

**4d Other program services. (Describe in Schedule O.)**

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e Total program service expenses ►** 1,667,695.

**Checklist of Required Schedules**

	<b>Yes</b>	<b>No</b>
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A .....	1	X
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) .....	2	X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I .....	3	X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II .....	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III .....	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I .....	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II .....	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III .....	8	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV .....	9	X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V .....	10	X
11 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI .....	11a	X
b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII .....	11b	X
c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII .....	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX .....	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X .....	11e	X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X .....	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII .....	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional .....	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E .....	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States? .....	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV .....	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV .....	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV .....	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) .....	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II .....	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III .....	19	X
20a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H .....	20	X
b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) .....	20b	

**b** If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) .....

**Checklist of Required Schedules (continued)**

	<b>Yes</b>	<b>No</b>
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II .....	21	X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III .....	22	X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J .....	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25 .....	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?.....	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?.....	24c	
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?.....	24d	
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I .....	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I .....	25b	X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II .....	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III .....	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV .....	28a	X
b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV .....	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV .....	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M .....	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M .....	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I .....	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II .....	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I .....	33	X
34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 .....	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? .....	35	X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 .....		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 .....	36	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI .....	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O .....	38	X

Form 990 (2010)

**Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response to any question in this Part V 

	Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....	<b>1a</b>	15
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.....	<b>1b</b>	0
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	<b>1c</b>	X
<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.....	<b>2a</b>	2
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .....	<b>2b</b>	X
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?.....	<b>3a</b>	X
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.....	<b>3b</b>	
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? .....	<b>4a</b>	X
<b>b</b> If 'Yes,' enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .....	<b>5a</b>	X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .....	<b>5b</b>	X
<b>c</b> If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? .....	<b>5c</b>	
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? .....	<b>6a</b>	X
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? .....	<b>6b</b>	X
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? .....	<b>7a</b>	
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided? .....	<b>7b</b>	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? .....	<b>7c</b>	
<b>d</b> If 'Yes,' indicate the number of Forms 8282 filed during the year .....	<b>7d</b>	
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? .....	<b>7e</b>	
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .....	<b>7f</b>	
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? .....	<b>7g</b>	
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? .....	<b>7h</b>	
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? .....	<b>8</b>	
<b>9 Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b> Did the organization make any taxable distributions under section 4966? .....	<b>9a</b>	
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person? .....	<b>9b</b>	
<b>10 Section 501(c)(7) organizations.</b> Enter:		
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 .....	<b>10a</b>	
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .....	<b>10b</b>	
<b>11 Section 501(c)(12) organizations.</b> Enter:		
<b>a</b> Gross income from members or shareholders .....	<b>11a</b>	
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) .....	<b>11b</b>	
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? .....	<b>12a</b>	
<b>b</b> If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year .....	<b>12b</b>	
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? .....		
<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.....	<b>13b</b>	
<b>c</b> Enter the amount of reserves on hand .....	<b>13c</b>	
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? .....	<b>14a</b>	X
<b>b</b> If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.....	<b>14b</b>	

**Governance, Management and Disclosure** For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI. ....

### Section A. Governing Body and Management

- |   | Yes | No |
|---|-----|----|
| 1a Enter the number of voting members of the governing body at the end of the tax year .....  | 1a  | 12 |
| b Enter the number of voting members included in line 1a, above, who are independent.....   | 1b  | 12 |
| 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? .....  | 2   | X  |
| 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? ..... | 3   | X  |
| 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .....  | 4   | X  |
| 5 Did the organization become aware during the year of a significant diversion of the organization's assets? .....  | 5   | X  |
| 6 Does the organization have members or stockholders? .....   | 6   | X  |
| 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? .....  | 7a  | X  |
| b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .....   | 7b  | X  |
| 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:   |     |    |
| a The governing body? .....   | 8a  | X  |
| b Each committee with authority to act on behalf of the governing body? .....   | 8b  | X  |
| 9 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O. ....      | 9   | X  |

### Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

- |  | Yes | No |
|--|-----|----|
| 10a Does the organization have local chapters, branches, or affiliates? .....  | 10a | X  |
| b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? .....   | 10b |    |
| 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? .....   | 11a | X  |
| b Describe in Schedule O the process, if any, used by the organization to review this Form 990.  | 12a | X  |
| 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 .....   | 12b | X  |
| b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? .....  | 12c | X  |
| c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done .....   | 13  | X  |
| 13 Does the organization have a written whistleblower policy? .....  | 14  | X  |
| 14 Does the organization have a written document retention and destruction policy? .....   | 15a | X  |
| 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  | 15b | X  |
| a The organization's CEO, Executive Director, or top management official .....   |     |    |
| b Other officers of key employees of the organization .....  |     |    |
| If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)   |     |    |
| 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? .....  | 16a | X  |
| b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? ..... | 16b |    |

### Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► See Form 990, Page 6, Line 17 (continued)
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
- Own website     Another's website     Upon request
- 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:  
 ► LANE & COMPANY    1920 N ST, NW    WASHINGTON    DC 20036    (202) 463-6500

**Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII .....

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of 'key employee.'

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (describe hours for related organiza- tions in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated	Former			
(1) ALAN BLINKEN DIRECTOR	1.00	X						0.	0.	0.
(2) TONY CALIGIURI DIRECTOR	1.00	X						0.	0.	0.
(3) AIMEE CHRISTENSEN DIRECTOR	1.00	X						0.	0.	0.
(4) DAN CHU DIRECTOR	1.00	X						0.	0.	0.
(5) TOM DOUGHERTY DIRECTOR	1.00	X						0.	0.	0.
(6) JAMESON FRENCH DIRECTOR	1.00	X						0.	0.	0.
(7) MARY HARRIS DIRECTOR	1.00	X						0.	0.	0.
(8) JIM LYON DIRECTOR	1.00	X						0.	0.	0.
(9) LARRY SCHWEIGER DIRECTOR	1.00	X						0.	0.	0.
(10) SUSAN SMARTT DIRECTOR	1.00	X						0.	0.	0.
(11) BIL MITCHELL PRESIDENT	2.00	X	X					0.	0.	0.
(12) MARTHA DARLING SECRETARY	2.00	X	X					0.	0.	0.
(13) THOMAS WARREN TREASRUEER	2.00	X						0.	0.	0.
(14) SUSAN BROWN EXECUTIVE DIRECTOR	12.00		X					51,174.	0.	2,757.
(15) -----										
(16) -----										
(17) -----										

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont)**

(A) Name and title	(B) Average hours per week (describe hours for related organi- zations in Sch O)	(C) Position (check all that apply)				(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Former or director or trustee	Individual trustee	Officer	Key employee			
(18)								
(19)								
(20)								
(21)								
(22)								
(23)								
(24)								
(25)								
(26)								
(27)								
(28)								
(29)								
<b>1b Sub-total</b>						51,174.	0.	2,757.
<b>c Total from continuation sheets to Part VII, Section A</b>								
<b>d Total (add lines 1b and 1c)</b>						51,174.	0.	2,757.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►

- 3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual .....
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual .....
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person .....

	Yes	No
3	X	
4	X	
5	X	

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 0

**Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
<b>CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS</b>	<b>1a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	1,038,547.				
	<b>g</b> Noncash contributions included in lns 1a-1f: \$						
<b>h Total.</b> Add lines 1a-1f .....		► 1,038,547.					
<b>PROGRAM SERVICE REVENUE</b>		<b>Business Code</b>					
	<b>2a</b>						
	<b>b</b>						
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue .....						
<b>g Total.</b> Add lines 2a-2f .....		►					
<b>3</b> Investment income (including dividends, interest and other similar amounts) .....		► 3,291.	0.	0.	0.	3,291.	
<b>4</b> Income from investment of tax-exempt bond proceeds .		►					
<b>5</b> Royalties .....		►					
<b>6a</b> Gross Rents .....	(i) Real	(ii) Personal					
<b>b</b> Less: rental expenses .....							
<b>c</b> Rental income or (loss) .....							
<b>d</b> Net rental income or (loss) .....		►					
<b>7a</b> Gross amount from sales of assets other than inventory .....	(i) Securities	(ii) Other					
<b>b</b> Less: cost or other basis and sales expenses .....							
<b>c</b> Gain or (loss) .....							
<b>d</b> Net gain or (loss) .....		►					
<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	a						
<b>b</b> Less: direct expenses .....	b						
<b>c</b> Net income or (loss) from fundraising events .....		►					
<b>9a</b> Gross income from gaming activities. See Part IV, line 19 .....	a						
<b>b</b> Less: direct expenses .....	b						
<b>c</b> Net income or (loss) from gaming activities .....		►					
<b>10a</b> Gross sales of inventory, less returns and allowances .....	a						
<b>b</b> Less: cost of goods sold .....	b						
<b>c</b> Net income or (loss) from sales of inventory .....		►					
<b>Miscellaneous Revenue</b>	<b>Business Code</b>						
<b>11a</b>							
<b>b</b>							
<b>c</b>							
<b>d</b> All other revenue .....		►					
<b>e</b> <b>Total.</b> Add lines 11a-11d .....		► 1,041,838.	0.	0.	0.	3,291.	
<b>12 Total revenue.</b> See instructions .....		►					

**Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 .....	1,800.	1,800.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 .....				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 .....				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	56,584.	50,360.	5,092.	1,132.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
7 Other salaries and wages .....	606,061.	542,528.	52,333.	11,200.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....				
9 Other employee benefits .....				
10 Payroll taxes .....				
11 Fees for services (non-employees):				
a Management .....				
b Legal .....	15,847.	7,632.	7,917.	298.
c Accounting .....	63,425.	0.	63,425.	0.
d Lobbying .....	83,714.	83,714.	0.	0.
e Professional fundraising services. See Part IV, line 17 .....				
f Investment management fees .....				
g Other .....	694,064.	693,664.	0.	400.
12 Advertising and promotion .....	40,256.	36,048.	1,560.	2,648.
13 Office expenses .....	221,521.	188,813.	24,503.	8,205.
14 Information technology .....	62,032.	24,660.	8,192.	29,180.
15 Royalties .....				
16 Occupancy .....				
17 Travel .....	57,708.	37,435.	17,549.	2,724.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .....				
19 Conferences, conventions, and meetings .....				
20 Interest .....				
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	1,098.	1,041.	57.	0.
23 Insurance .....	2,886.	0.	2,886.	0.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) .....				
a .....				
b .....				
c .....				
d .....				
e .....				
f All other expenses .....				
25 Total functional expenses. Add lines 1 through 24f .....	1,906,996.	1,667,695.	183,514.	55,787.
26 Joint costs. Check here ► <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation .....				

**Balance Sheet**

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash – non-interest-bearing .....		1	
	2 Savings and temporary cash investments .....		1,059,986.	2 806,851.
	3 Pledges and grants receivable, net .....		651,498.	3 95,000.
	4 Accounts receivable, net .....		4,417.	4
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....			5
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) .....			6
	7 Notes and loans receivable, net .....			7
	8 Inventories for sale or use .....			8
	9 Prepaid expenses and deferred charges .....			9
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a	5,028.		
b Less: accumulated depreciation .....	10b	4,332.	1,794.	10c 696.
11 Investments – publicly traded securities .....			11	
12 Investments – other securities. See Part IV, line 11 .....			12	
13 Investments – program-related. See Part IV, line 11 .....			13	
14 Intangible assets .....			14	
15 Other assets. See Part IV, line 11 .....			15	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....		1,717,695.	16	902,547.
17 Accounts payable and accrued expenses .....		77,897.	17	127,907.
18 Grants payable .....			18	
19 Deferred revenue .....			19	
20 Tax-exempt bond liabilities .....			20	
21 Escrow or custodial account liability. Complete Part IV of Schedule D .....			21	
22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....			22	
23 Secured mortgages and notes payable to unrelated third parties .....			23	
24 Unsecured notes and loans payable to unrelated third parties .....			24	
25 Other liabilities. Complete Part X of Schedule D .....			25	
<b>26 Total liabilities.</b> Add lines 17 through 25 .....		77,897.	26	127,907.
NET ASSETS OR FUND BALANCES				
Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.				
27 Unrestricted net assets .....		1,007,933.	27	504,783.
28 Temporarily restricted net assets .....		631,865.	28	269,857.
29 Permanently restricted net assets .....			29	
Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.				
30 Capital stock or trust principal, or current funds .....			30	
31 Paid-in or capital surplus, or land, building, or equipment fund .....			31	
32 Retained earnings, endowment, accumulated income, or other funds .....			32	
33 Total net assets or fund balances .....		1,639,798.	33	774,640.
<b>34 Total liabilities and net assets/fund balances.</b> .....		1,717,695.	34	902,547.

Form 990 (2010)

BAA

**Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI 

1 Total revenue (must equal Part VIII, column (A), line 12) .....	1	1,041,838.
2 Total expenses (must equal Part IX, column (A), line 25) .....	2	1,906,996.
3 Revenue less expenses. Subtract line 2 from line 1 .....	3	-865,158.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).....	4	1,639,798.
5 Other changes in net assets or fund balances (explain in Schedule O) .....	5	
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) .....	6	774,640.

**Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII 

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....	2a	X
b Were the organization's financial statements audited by an independent accountant? .....	2b	X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....	2c	X
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: .....		
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....	3a	X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. ....	3b	

**SCHEDULE C**  
(Form 990 or 990-EZ)Department of the Treasury  
Internal Revenue Service**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

**2010**

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	Employer identification number
NATIONAL WILDLIFE FEDERATION ACTION FUND	74-2556532

**Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. ► \$ 462,393.  
 2 Political expenditures .....  
 3 Volunteer hours ..... 20

**Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. .... ► \$  
 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ► \$  
 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Yes  No  
 4a Was a correction made? .....  
 b If 'Yes,' describe in Part IV.

**Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. .... ► \$ 493,498.  
 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ► \$ 0.  
 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b. .... ► \$ 493,498.  
 4 Did the filing organization file Form 1120-POL for this year?  Yes  No  
 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.  	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)	-----			
(2)	-----			
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2010

**Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

**A** Check  if the filing organization belongs to an affiliated group.

**B** Check  if the filing organization checked box A and 'limited control' provisions apply.

**Limits on Lobbying Expenditures**  
(The term 'expenditures' means amounts paid or incurred.)

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying) .....
- b** Total lobbying expenditures to influence a legislative body (direct lobbying) .....
- c** Total lobbying expenditures (add lines 1a and 1b) .....
- d** Other exempt purpose expenditures .....
- e** Total exempt purpose expenditures (add lines 1c and 1d) .....

**f** Lobbying nontaxable amount. Enter the amount from the following table in both columns.

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e.
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.
Over \$17,000,000	\$1,000,000.

**g** Grassroots nontaxable amount (enter 25% of line 1f) .....

**h** Subtract line 1g from line 1a. If zero or less, enter -0- .....

**i** Subtract line 1f from line 1c. If zero or less, enter -0- .....

**j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....  Yes  No

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
<b>2a</b> Lobbying non-taxable amount .....					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e)) .....					
<b>c</b> Total lobbying expenditures .....					
<b>d</b> Grassroots nontaxable amount .....					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e)) .....					
<b>f</b> Grassroots lobbying expenditures .....					

**Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		(b)	
	Yes	No	Amount	
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities? If 'Yes,' describe in Part IV				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If 'Yes,' enter the amount of any tax incurred under section 4912				
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912.				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

**Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	X
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	X

**Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.'**

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a Current year	2b	
b Carryover from last year	2c	
c Total	3	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	5	
5 Taxable amount of lobbying and political expenditures (see instructions)		

**Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

Pt I-A Line 1 THE NWF ACTION FUND ENGAGED IN LIMITED

INDEPENDENT EXPENDITURES AND CANIDATE ENDORSEMENTS

**Supplemental Information (continued)**

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**SCHEDULE D**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0047

**2010****Supplemental Financial Statements**

- Complete if the organization answered 'Yes' to Form 990,  
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.  
► Attach to Form 990. ► See separate Instructions.

Name of the organization

Employer identification number

NATIONAL WILDLIFE FEDERATION ACTION FUND

74-2556532

 **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate grants from (during year) .....		
4 Aggregate value at end of year .....		

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....  Yes  No
- 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....  Yes  No

 **Conservation Easements.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).

- Preservation of land for public use (e.g., recreation or education)  Preservation of an historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

Held at the End of the Tax Year	
2a	
2b	
2c	
2d	

- a Total number of conservation easements .....
- b Total acreage restricted by conservation easements .....
- c Number of conservation easements on a certified historic structure included in (a) .....
- d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► \_\_\_\_\_
- 4 Number of states where property subject to conservation easement is located ► \_\_\_\_\_
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....  Yes  No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year  
 ► \_\_\_\_\_
- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  
 ► \$ \_\_\_\_\_
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....  Yes  No
- 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

 **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

- (i) Revenues included in Form 990, Part VIII, line 1 ..... ► \$ \_\_\_\_\_
- (ii) Assets included in Form 990, Part X ..... ► \$ \_\_\_\_\_
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 ..... ► \$ \_\_\_\_\_
- b Assets included in Form 990, Part X ..... ► \$ \_\_\_\_\_

**Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

**3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- |   |   |
|---|---|
| <b>a</b> <input type="checkbox"/> Public exhibition                   | <b>d</b> <input type="checkbox"/> Loan or exchange programs |
| <b>b</b> <input type="checkbox"/> Scholarly research                  | <b>e</b> <input type="checkbox"/> Other _____               |
| <b>c</b> <input type="checkbox"/> Preservation for future generations |   |

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? .....  Yes  No

**Escrow and Custodial Arrangements.** Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

**1a** Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? .....  Yes  No

**b** If 'Yes,' explain the arrangement in Part XIV and complete the following table:

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**2a** Did the organization include an amount on Form 990, Part X, line 21? .....  Yes  No

**b** If 'Yes,' explain the arrangement in Part XIV.

**Endowment Funds.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance .....					
<b>b</b> Contributions .....					
<b>c</b> Net investment earnings, gains, and losses .....					
<b>d</b> Grants or scholarships .....					
<b>e</b> Other expenditures for facilities and programs .....					
<b>f</b> Administrative expenses .....					
<b>g</b> End of year balance .....					

**2** Provide the estimated percentage of the year end balance held as:

**a** Board designated or quasi-endowment ► \_\_\_\_\_ %

**b** Permanent endowment ► \_\_\_\_\_ %

**c** Term endowment ► \_\_\_\_\_ %

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- |  |               |           |
|--|---------------|-----------|
| <b>(i)</b> unrelated organizations ..... | <b>Yes</b>    | <b>No</b> |
| <b>(ii)</b> related organizations .....  | <b>3a(i)</b>  |           |
|  | <b>3a(ii)</b> |           |
|  | <b>3b</b>     |           |

**b** If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? .....

**4** Describe in Part XIV the intended uses of the organization's endowment funds.

**Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land .....				
<b>b</b> Buildings .....				
<b>c</b> Leasehold improvements .....				
<b>d</b> Equipment .....		5,028.	4,332.	696.
<b>e</b> Other .....				
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) .....				696.

BAA Schedule D (Form 990) 2010

**Investments—Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
(I) _____		
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.) ►		

**Investments—Program Related.** (See Form 990, Part X, line 13)

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) _____		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
(10) _____		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ►		

**Other Assets.** (See Form 990, Part X, line 15)

(a) Description	(b) Book value
(1) _____	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
(10) _____	
Total. (Column (b) must equal Form 990, Part X, column(B), line 15) ►	

**Other Liabilities.** (See Form 990, Part X, line 25)

(a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
(10) _____	
(11) _____	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25) ►	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

**Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1 Total revenue (Form 990, Part VIII, column (A), line 12) .....	1,041,838.
2 Total expenses (Form 990, Part IX, column (A), line 25) .....	1,906,996.
3 Excess or (deficit) for the year. Subtract line 2 from line 1 .....	-865,158.
4 Net unrealized gains (losses) on investments .....	
5 Donated services and use of facilities .....	
6 Investment expenses .....	
7 Prior period adjustments .....	
8 Other (Describe in Part XIV) .....	5,523.
9 Total adjustments (net). Add lines 4 through 8 .....	5,523.
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 .....	-859,635.

**Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1 Total revenue, gains, and other support per audited financial statements .....	1	1,082,729.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments .....	2a	
b Donated services and use of facilities .....	2b	
c Recoveries of prior year grants .....	2c	
d Other (Describe in Part XIV) .....	2d	40,891.
e Add lines 2a through 2d .....	2e	40,891.
3 Subtract line 2e from line 1 .....	3	1,041,838.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b .....	4a	
b Other (Describe in Part XIV.) .....	4b	
c Add lines 4a and 4b .....	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) .....	5	1,041,838.

**Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1 Total expenses and losses per audited financial statements .....	1	1,942,364.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities .....	2a	
b Prior year adjustments .....	2b	
c Other losses .....	2c	
d Other (Describe in Part XIV.) .....	2d	35,368.
e Add lines 2a through 2d .....	2e	35,368.
3 Subtract line 2e from line 1 .....	3	1,906,996.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b .....	4a	
b Other (Describe in Part XIV.) .....	4b	
c Add lines 4a and 4b .....	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) .....	5	1,906,996.

**Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Pt XI Line 8 RELATED PAC NET ASSETS

Pt XII Line 2d RELATED PAC REVENUES

Pt XIII Line 2d RELATED PAC EXPENSES

**Supplemental Information (continued)**

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**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

**2010**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
► Attach to Form 990 or 990-EZ.

Name of the organization

NATIONAL WILDLIFE FEDERATION ACTION FUND

Employer identification number

74-2556532

PART I, LINE 1 AND PART III, LINE 1: THE NATIONAL WILDLIFE FEDERATION ACTION FUND WORKS TO RAISE THE VISIBILITY OF KEY CONSERVATION ISSUES WITH VOTERS AND ELECTED OFFICIALS. THROUGH GRASSROOTS ACTION AND FOCUSED LEGISLATIVE CAMPAIGNS, THE NWF ACTION FUND ADVOCATES FOR WILDLIFE AND OUTDOOR ENTHUSIASTS FROM ALL WALKS OF LIFE AND POLITICAL STRIPES TO ENSURE THEY HAVE A VOICE IN THE DEMOCRATIC PROCESS.

WE ADVOCATE FOR CLIMATE SOLUTIONS, NATURAL RESOURCE PROTECTION, WILDLIFE CONSERVATION AND OUTDOOR EDUCATION TO MEET OUR TOP GOALS OF CONFRONTING GLOBAL WARMING, PROTECTING WILDLIFE HABITATS AND CONNECTING PEOPLE WITH NATURE.

PART III, LINE 4A: RAISED AWARENESS AND PUBLIC ENGAGEMENT ON THE ISSUES OF CLIMATE CHANGE AND CLEAN ENERGY:

PRODUCTION OF INFORMATIVE MATERIALS AND VENUES SUCH AS MEDIA ADS AND TOWN HALLS TARGETED TO LOCALIZED POPULATIONS AND MEDIA MARKETS. EDUCATION OUTREACH EFFORTS TO SPORTSMEN LEADERS.

ADVOCATED FOR PROTECTION OF CLEAN AIR ACT AND CLEAN WATER ACT LAWS: PRODUCED ADVOCACY ADS IN TARGET LEGISLATIVE DISTRICTS/STATES TO OPPOSE ROLLBACK OF CONSERVATION FUNDING AND LAWS.

FACILITATED LEGISLATIVE FLY INS WITH LEADERS OF KEY CONSTITUENCY GROUPS TO TRAVEL TO DC FOR LEGISLATIVE BRIEFINGS AND MEETINGS WITH LEGISLATORS RELATED TO THE RESTORE ACT AND GULF RESTORATION. SUPPORTED OUTREACH EFFORTS TO KEY CONSTITUENCY GROUPS INCLUDING SPORTSMEN, FAITH AND EDUCATION ORGANIZATIONS.

PARTICIPATED IN COLLABORATIVE EFFORT WITH OTHER ORGANIZATIONS

Name of the organization

NATIONAL WILDLIFE FEDERATION ACTION FUND

Employer identification number

74-2556532

TO ADVOCATE FOR PROTECTION OF CLEAN AIR LAWS,  
PROVIDING STRATEGIC GUIDANCE, AND PROGRAM WORK.  
MOBILIZE AND ENGAGE ACTIVISTS ONLINE TO TAKE ACTION FOR CONSERVATION:  
MAINTAINED ACTION CENTER - AN ONLINE HUB TAKING ACTION TO  
SUPPORT VARIOUS WILDLIFE PROTECTION AND CONSERVATION  
EFFORTS NATIONWIDE.  
GENERATED OVER 1.5 MILLION DIVERSE ACTIONS THROUGH ONLINE ACTION CENTER.

Pt VI-A, Line 6 A "MEMBER" OF THE ORGANIZATION IS DEFINED BY THE ORGANIZATION  
AS AN INDIVIDUAL THAT SHOWS AN ANNUAL MONETARY COMMITMENT  
TO THE ORGANIZATION OF AT LEAST \$10.00.

Pt VI-B, Line 11a THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS THE  
DRAFT WITH STAFF AND OUTSIDE INDEPENDENT ACCOUNTANTS, AND  
OPPORTUNITY FOR QUESTIONS AND IN DEPTH DISCUSSION OF EACH LINE  
ITEM IS PROVIDED. THE FINAL DRAFT OF THE 990 IS PROVIDED  
TO THE FULL BOARD FOR REVIEW AND COMMENTS BEFORE FILING.

Pt VI-B, Line 12c OFFICERS, DIRECTORS AND EMPLOYEES ARE REQUIRED TO DISCLOSE  
INTERESTS AND OTHER AFFILIATIONS THAT MAY RESULT IN A FINANCIAL  
OR GOVERNANCE CONFLICT WITH NWFAF. THE BOARD REVIEWS AND MAKES  
DETERMINATIONS REGARDING SUCH DISCLOSURES.

Pt VI-B, Line 15 THE EXECUTIVE DIRECTOR POSITION IS PART-TIME. THIS POSITION  
ALSO WORKS PART-TIME WITH THE NATIONAL WILDLIFE FEDERATION  
(AN UNRELATED ORGANIZATION). IN THAT CAPACITY, THE POSITION IS  
GRADED AND COMPENSATION IS BENCHMARKED BY THE HUMAN RESOURCES

Name of the organization

NATIONAL WILDLIFE FEDERATION ACTION FUND

Employer identification number

74-2556532

DEPARTMENT, ALONG WITH THAT OF ALL NATIONAL WILDLIFE FEDERATION EMPLOYEES.  
THE ACTION FUND THEN PAYS COMPENSATION AT THE RATE DETERMINED  
BY THIS PROCESS. THERE ARE NO OTHER COMPENSATED OFFICERS,  
DIRECTORS OR KEY EMPLOYEES.

Pt VI-C, Line 19 THE ORGANIZATION'S ARTICLE OF INCORPORATION, BYLAWS, 990,  
AUDITED FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY AND  
WHISTLEBLOWER POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

PART IX, LINES 7 AND 8: THESE NUMBERS REFLECT THE NWFAF  
STAFF LISTED ON PART I, LINE 5, AS WELL AS SALARY AND BENEFITS  
PAID TO THE NATIONAL WILDLIFE FEDERATION PURSUANT TO A RESOURCE  
SHARING AGREEMENT BETWEEN THE FILING ORGANIZATION AND  
THAT ORGANIZATION.

PART IX, LINE 11G: THE EXPENSES INCLUDED IN OTHER ARE  
MOSTLY ALL DIRECT PROGRAM COSTS THAT DO NOT FIT THE OTHER  
NAMED CATEGORIES, PROVIDED IN THIS PART IX.

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

OMB No. 1545-0047

Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF

**2010**

Name of the organization

NATIONAL WILDLIFE FEDERATION ACTION FUND

Employer identification number

74-2556532

Organization type (check one):

Filers of:

Form 990 or 990-EZ

**Section:**

- 501(c)(4) (enter number) organization  
 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation  
 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation  
 4947(a)(1) nonexempt charitable trust treated as a private foundation  
 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

**Special Rules**

- For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year ..... ► \$ \_\_\_\_\_

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990,  
990EZ, or 990-PF.****Schedule B** (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

Employer identification number

NATIONAL WILDLIFE FEDERATION ACTION FUND

74-2556532

**Contributors** (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 125,480.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 13,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 13,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ 6,738.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

NATIONAL WILDLIFE FEDERATION ACTION FUND

74-2556532

**Contributors** (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ 130,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8		\$ 470,999.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9		\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

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Schedule O (Form 990), Supplemental Information to Form 990**Form 990, Page 6, Line 17 (continued)**

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VirginiaDistrict of ColumbiaColorado

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Application for Extension of Time To File an  
Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury  
Internal Revenue Service

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box ..... ►
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits.

**Automatic 3-Month Extension of Time.** Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only ..... ► *All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.*

Type or print	Name of exempt organization	Employer identification number
File by the due date for filing your return. See instructions.	NATIONAL WILDLIFE FEDERATION ACTION FUND	74-2556532
	Number, street, and room or suite number. If a P.O. box, see instructions.	
	901 E STREET, NW, #400	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	DC 20004

Enter the Return code for the return that this application is for (file a separate application for each return) ..... **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► LANE & COMPANY

Telephone No. ► (202) 463-6500

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ..... ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ..... If this is for the whole group, check this box .. ►  . If it is for part of the group, check this box .. ►  and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Apr 17, 20 12, to file the exempt organization return for the organization named above.

The extension is for the organization's return for:

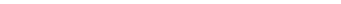
- calendar year 20 \_\_\_\_\_ or
- tax year beginning Sep 1, 20 10, and ending Aug 31, 20 11.

2 If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions ..... **3a \$ 0.**b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit ..... **3b \$ 0.**c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions ..... **\$ 0.****Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.**BAA For Paperwork Reduction Act Notice, see Instructions.**

Form 8868 (Rev. 1-2011)

**Notice Number:** CP211A  
**Date:** February 27, 2012

029037.939869.0098.003 1 AT 0.374 373



NATIONAL WILDLIFE FEDERATION ACTION  
% DULCE ZORMELO  
11100 WILDLIFE CENTER DR  
RESTON VA 20190-5361

**Taxpayer Identification Number:**  
74-2556532  
**Tax Form:** 990  
**Tax Period:** August 31, 2011

**APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT  
ORGANIZATION RETURN - APPROVED**

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is **April 15, 2012**.

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, easiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at [www.irs.gov/eo](http://www.irs.gov/eo). This site will provide information about:

- The type of returns that can be filed electronically,
  - approved e-File providers, and
  - if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.



- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box .....

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

**Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

<b>Type or print</b>	Name of exempt organization <b>NATIONAL WILDLIFE FEDERATION ACTION FUND</b>	Employer identification number <b>74-2556532</b>
	Number, street, and room or suite number. If a P.O. box, see instructions. <b>901 E STREET, NW, #400</b>	
<b>File by the extended due date for filing the return. See instructions.</b>	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>WASHINGTON DC 20004</b>	

Enter the Return code for the return that this application is for (file a separate application for each return) ..... **01**

<b>Application Is For</b>	<b>Return Code</b>	<b>Application Is For</b>	<b>Return Code</b>
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in care of ► LANE & COMPANY Telephone No. ► (202) 463-6500 FAX No. ► \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box .....
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ..... \_\_\_\_\_ . If this is for the whole group, check this box ... ►  . If it is for part of the group, check this box ►  and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until Jul 16, 20 12.

5 For calendar year \_\_\_\_\_, or other tax year beginning Sep 1, 20 10, and ending Aug 31, 20 11.

6 If the tax year entered in line 5 is for less than 12 months, check reason:  Initial return  Final return

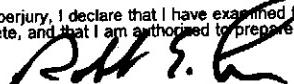
Change in accounting period

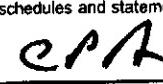
7 State in detail why you need the extension ... ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

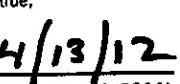
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions .....	8a \$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 .....	8b \$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions .....	8c \$	0.

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ► 

Title ► 

Date ► 

FIFZ0502 11/15/10

Form 8868 (Rev 1-2011)

BAA